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EFS ID:

16829

Application ID:

10064628

Title of Invention:

TEMPORAL IMAGE COMPARISON

First Named Inventor:

METHOD

Gopal Avinash

Domestic/Foreign Application:

Domestic Application

Filing Date:

null

Effective Receipt Date:

2002-07-31

Submission Type:

Utility Patent Filing

Filing Type:

new-utility

Confirmation Number:

0

Attorney Docket Number:

GEMS0148PUS

Digital Certificate Holder:

cn=John A. Artz, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S.

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Total Fees Authorized:

\$780.0

Payment Category:

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Deposit Account Number:

500476

Deposit Account Name:

John A. Artz

TRANSMITTAL FORM

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Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility

Patent Filing

Attorney Docket Number:

GEMS0148PUS

TEMPORAL IMAGE COMPARISON METHOD

First Named Inventor: Gopal B. Avinash

SUBMITTED BY

Name: Mr. John A. Artz

Registration Number: 25824

Electronic Signature Mark: John A.

Artz

Date Signed: 20020731

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Attached Files:

declaration Declaration 1.tif

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declaration Declaration3.tif

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specification

bibd-transmittal

fee-transmittal

patent-assignments

Specification.xml

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Assignment.xml

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Declaration1.tif

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Comments:

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		Attorney Docket	Attorney Docket Number				
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named Inv	First Named Inventor				
		COMPLETE IF KNOWN					
		Application Num	ber	Applied	For		
Declaration Submitted OR	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	Herev	with			
		Group Art Unit					
with Initial Filing		Examiner Name					
As a below named inventor, I he	reby declare that:			· · · · · · · · · · · · · · · · · · ·			
My residence, mailing address, and	d citizenship are as stated	below next to my name	3.				
I believe I am the original, first and	sole inventor (if only one r	name is listed below) or	r an original,	first and joint invento	r (if plural		
names are listed below) of the sub		d and for which a pater	nt is sought o	on the invention entities	ea:		
METHOD FOR TEMPORAL IMA	AGE COMPARISON						
					1		
					}		
u construction of this	(Title of the	Invention)					
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
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Application Number	and was ame	ended on (MM/DD/YYY	Y)		(if applicable).		
<u> </u>					,		
I hereby state that I have reviewed amended by any amendment spec	I and understand the conte cifically referred to above.	ents of the above identif	fied specifica	tion, including the cla	aims, as		
Lacknowledge the duty to disclose	information which is mate	rial to patentability as d	lefined in 37	CFR 1.56, including	for continuation-		
in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other							
than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the							
application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Not Claime		NO NO		
		1					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

[Page 1 of 2]

Burden Hour Statement This form is estimated to take 21 minutes to complete Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC

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DECLARATION — Utility or Design Patent Application

Customer Number OR Correspondence address below Direct all correspondence to: or Bar Code Label Robert P. Renke Name Artz & Artz, P.C. 28333 Telegraph Rd., Ste. 250 Address 48034 Southfield ZIP State City (248) 223-9522 (248) 223-9500 USA Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor NAME OF SOLE OR FIRST INVENTOR: Gopal B. Avinash **Family Name** Given Name (first and middle [if any]) or Surname 2002 **Inventor's** Date Signature USA New Berlin WI Country Citizenship State Residence: City 4915 S. Radisson Court Mailing Address 53151 USA New Berlin WI Country 71P State City A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Sabol Given Name John M. Family Name (first and middle [if any]) or Surname

[Page 2 of 2]

WI

State

State

USA

53089-5024

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Citizenship

Country

Country

USA

Inventor's Signature

City

Residence: City

Mailing Address

Sussex

N58 W24838 Cardinal Ct.

Sussex

Additional inventors are being named on the

Please type a plus sign (*) Inside this box — — — — — — — — — — — — — — — — — — —			P10/SB/02A (11-00) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ond to a collection of information unless it contains a valid OMB control number.				
DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2					
		-					
Name of Additional Joint Inventor, if any:			A petition has been file	ed for th	nis unsigned inventor		
Given Name (first and middle [if any])			Family Nan	ne or Si	umame		
Vianney Pierre		Batt	le				
Inventor's Signature				_	Date 7/8/2002		
Milwaukee Residence: City	WI State	c	USA		France Citizenship		
1029 North Jackson Stree	t						
Mailing Address							
City Milwaukee	State WI		ZIP 53202	Countr	y USA		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Sumame				
Kadri Nizar			Jabri				
Inventor's Signature Milmi Ilmi					Date 7/8/02		
Residence: City Waukesha	State WI		Country USA	Citizenship Lebanon			
Mailing Address 2833 N. University Drive, #	201						
Mailing Address							
City Waukesha	State WI		ZIP 53188 Co		USA puntry		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature					Date		
Residence: City	State		Country		Citizenship		
Mailing Address							
Marillan Address							
Mailing Address		**					

City State ZIP Country

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of _2_					
	<u> </u>						
Name of Additional Joint Inventor, if an	ıy:	A petition ha	as been filed for	this unsigned inventor			
Given Name (first and middle [if any])		amily Name or	Surname			
Renuka		Uppaluri					
Inventor's Signature		······································		Date 0 7/10/02			
Pewaukee Residence: City	State WI	Country	SA	Indian Citizenship			
W271N5291 Orchard Lar	ne						
Mailing Address							
City Pewaukee State WI ZIP 53072 Country USA							
Name of Additional Joint Inventor, if an	y:	☐ A petition has	☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]	Family Name or Surname						
Inventor's Signature				Date			
Residence: City	Residence: City State			Citizenship			
Mailing Address							
Mailing Address							
City	State	ZIP	Co	untry			
Name of Additional Joint Inventor, if an		☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])	Family Name or Sumame						
Inventor's Signature				Date			
Residence: City	State	Country		Citizenship			
Mailing Address							
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TOTAL FEES AUTHORIZED: \$780

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SUBMITTED BY

Authorized Name:

John A. Artz

Electronic Signature Mark:

John A. Artz

Date Signed:

20020731

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid		
Utility Filing Fee	101	\$ 740		

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	103	\$ 18	0	\$ 0
Independent Claims: 3	102	\$ 84	0	\$ O

Subtotal For Extra Claims Fees: \$ 0

ADDITIONAL FEES

Fee Description	Number	Quantity	Fee Code	Amount	Fee Paid
Recording Each Patent Assignment Per Property Fee	00000000	1	581	\$ 40	\$ 40

Subtotal For Additional Fees: \$ 40